Meta-analysis comparing higher and lower dose radiotherapy for palliation in locally advanced lung cancer

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Published in:
Cancer science

DOI:
10.1111/cas.12659

Cancer Science
Japanese Cancer Association JCA
Open Access

Letter to the Editor

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Cancer Sci **106** (2015) 782

doi: 10.1111/cas.12659

Dear Editor,

In the context of an update of the Dutch guideline on non-small-cell lung cancer, we performed a systematic review on the clinical effectiveness of low-dose (i.e. <30 Gy) *versus* high-dose palliative radiotherapy (i.e. ≥30 Gy). We identified the recent meta-analysis of Ma *et al.*[1] that included five randomized trials published until June 2013. Our systematic review confirmed the completeness of the search of Ma *et al.* However, when we examined the forest plot of the effect on 1-year overall survival, the Dutch trial of Kramer *et al.*[2] was found to be discordant with the four other included studies. Verification of the full-text publication confirmed that Kramer's results were wrongly extracted by Ma *et al.* (high-dose, 11% instead of 20%; low-dose, 20% instead of 11%), possibly resulting in an underestimation of the pooled effect and wrong conclusions. We would like to ask the authors to redo the meta-analysis with the correct data, and to reconsider the conclusions based on the new results.

Acknowledgments

This work was commissioned by the Netherlands Comprehensive Cancer Organisation (IKNL). The commissioner had no role in the drafting and revision of the paper, nor in the decision to submit the paper for publication.

Disclosure Statement

The authors have no conflict of interest.

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Received February 20, 2015; Accepted March 17, 2015